| | | Form C-103 |
|---|--|--|
| DISTRIBUTION | | Supersedes Old C-102 and C-103 |
| SANTA FE | NEW MEXICO OIL CONSERVATION COMMI | SSION Effective 1-1-65 |
| FILE | | • |
| U.S.G.S. | | 5a. Indicate Type of Lease |
| LAND OFFICE | | State Fee |
| OPERATOR | | 5. State Oil & Gas Lease No. |
| | | A-1320 |
| SUI | NDRY NOTICES AND REPORTS ON WELLS R PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RI LICATION FOR PERMIT - " (FORM C-101) FOR SUCH PROPOSALS.) | ESERVOIR. |
| 1. | , | 7. Unit Agreement Name |
| WELL GAS WELL | OTHER- | • |
| 2. Name of Operator | | 8. Farm or Lease Name |
| Exxon Corporatio | n | |
| 3. Address of Operator | 14 | NEW MEXICOK STATE 9. Well No. |
| P.O. Port 1600 W | 4-111 m 70700 | a. Well No. |
| 4. Location of Well | idland, Texas 79702 | |
| | | 10. Field and Pool, or Wildcat |
| UNIT LETTER | 660 FEET FROM THE EAST LINE AND 198 | 7.5 FEET FROM UACURING (GR. S.A) |
| | | |
| THE SOUTH LINE, S | ECTION 32 TOWNSHIP 17-5 RANGE 3 | 5-E NMPM. |
| | 15. Elevation (Show whether DF, RT, GR, etc.) | 12. County |
| | 3968 CR. | Lea |
| 16. | | |
| Che | ck Appropriate Box To Indicate Nature of Notice, | Report or Other Data |
| NOTICE O | F INTENTION TO: | SUBSEQUENT REPORT OF: |
| | · | · |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON REMEDIAL WORK | ALTERING CASING |
| TEMPORARILY ABANDON | COMMENCE DRILLING | |
| PULL OR ALTER CASING | CHANGE PLANS CASING TEST AND CEN | |
| , | OTHER CS6 | LEAK SURVEY |
| OTHER | | |
| | | |
| 17. Describe Proposed or Complete work) SEE RULE 1603. | d Operations (Clearly state all pertinent details, and give pertinen | at dates, including estimated date of starting any proposed |
| work) SEE ROLE 1103. | | , |
| Clean out cel | llar to surface casing. | |
| | | |
| Install bleed control valve | der line from /D344" surface casing at surface. | ng to above ground level with |
| | _ | |
| Install bleed | der line from 150 " intermediate | casing to above ground level with |
| control valve | at surface. | and the above Broady level with |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | • |
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| | | |
| | | |
| | | |
| | | |
| 18. I hereby certify that the informa | tion above is true and complete to the best of my knowledge and be | elief. |
| 6 10 00 | | •• |
| $\mathcal{N} \mathcal{L} \mathcal{L} \mathcal{L} \mathcal{L} \mathcal{L} \mathcal{L} \mathcal{L}$ | . | |
| SIGNED WA USM | mh title Unit Head | DATE 2-3-77 |
| | Trie Wood 5 To | |
| | The state of the s | GER 17 as a |
| APPROVED BY | | I for the first of |
| | | |

CONDITIONS OF APPROVAL, IF ANY:

